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|--|----------------|---------------|
| <b>TRANSMITTAL FORM</b><br><br>(for all correspondence after initial filing) | Application #  | 10/535,270    |
|  | Confirmation # | 5756          |
|  | Filing Date    | 02/09/2006    |
|  | First Inventor | NEWKIRK ET AL |
|  | Art Unit       | 1655          |
| Examiner   | Qiuwen, Mi     |               |
| Total number of pages in this submission =                                   | Docket #       | 101927/43     |

| ENCLOSURES (check all that apply)   |   |
|---|---|
| <input type="checkbox"/> Fees calculated below<br><input checked="" type="checkbox"/> Amendment After Allowance<br><input checked="" type="checkbox"/> including Attachment(s)<br><input type="checkbox"/> After Final Amendment/Reply<br><input type="checkbox"/> including Attachment(s)<br><input checked="" type="checkbox"/> Response to Interview Summary | <input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/><br><input type="checkbox"/> |

| FEES CALCULATION: For claims if required and/or other fees as shown below:     |   |                     |               |            |    |
|--|---|---------------------|---------------|------------|----|
|  | NOW   | Previously Paid For | Present Extra | Rate       | \$ |
| <input type="checkbox"/> TOTAL CLAIMS  |   | - 20                |               | X \$ 52 =  |    |
| <input type="checkbox"/> INDEPENDENT CLAIMS                                    |   | - 3                 |               | X \$ 220 = |    |
| TOTAL OF ABOVE CLAIMS FEES =   |   |                     |               |            |    |
| <input type="checkbox"/> Reduction by 1/2 for small entity status of applicant |   |                     |               |            |    |
| SUBTOTAL =   |   |                     |               |            |    |
| <input type="checkbox"/> Extension of Time for                                 | month(s) (serving as a constructive EOT Petition) |                     |               |            |    |
| <input type="checkbox"/> Other fee for   |   |                     |               |            |    |
| TOTAL OF ALL FEES =  |   |                     |               |            | 0  |

- ☐ Payment of \$ is made by:
- ☐ ELECTRONIC FUNDS TRANSFER - submitted concurrently herewith.
  - ☐ CREDIT CARD PAYMENT FORM - PTO-2038 submitted concurrently herewith.
- ☒ The Director is authorized to charge any fee, additional fee or extension fee due in connection herewith to Deposit Account No. 12-0555:
- (1) if no payment or an insufficient payment is enclosed and a fee is due in connection herewith; or
  - (2) if no petition for extension of time is enclosed but an EOT is required - and in this event, applicant hereby petitions under 37 CFR 1.136(a) for an extension of time of as many months as are required to render this submission timely.

Date: May 12, 2011

Signed By  Name: Eric G. Wright  
Attorney of Record Registration No.: 48,045

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